

Missouri Ethics Commission (MEC)
PO Box 1370, Jefferson City MO 65102, (800) 392-8660, www.mec.mo.gov

Office Use:

Statement of Committee Organization

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1.	Statement Information	o e de la compania del compania de la compania del compania de la compania del la compania de la compania della	
	Date: $2 9 208$ Type: \square New \square Amended (if amending, enter MEC ID \square	al D81 & section cha	anged 7
2.	Committee Information	The second secon	J. J
	Wasinger for County Council		
	P. D. BOX 31643 Des Reges MO Committee Mailing Address, City, State, & Zio	63131	(B14) Glob - School
		St Louis Count	1
	Committee Type: ☐ Campaign ☐ Candidate ☐ Continuing (P.	PAC) Debt Service Explo	oratory
3.	Treasurer/Deputy Treasurer Information		
	Treasurer's Name (First & Last)	Treasurer's Email Address (optional)	
	Treasurer's Mailing Address, City, State, & Zip	() Treasurer's Home Telephone Number	Treasurer's Work Telephone Number
	Deputy Treasurer's Name (if one appointed)	Deputy Treasurer's Email Address (optional)	,
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number	Dep. Treasurer's Work Telephone Number
4.	Additional Committee Information		· · · · · · · · · · · · · · · · · · ·
	Additional Committee Officer's Namela Title (If an)	Additional Committee Officer's Mailing Address, City, State, & Zip	
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, Ci	ty, State, & Zip
	CANDIDATES: Do you have more than one candidate committee?	☐ Yes (refer to instructions on b	pack) 🗆 No
5.	Official Bank Account Information (required by all committees)		
	Name & Mailing Address, City, State, & Zip of Financial Institution	Account Name	Account Number
5 .	Candidate Supported or Opposed (candidate committees must-in		ente en Entre en 1910 - Erreine en lander grottpegt til til ende ettagen. Hanne
	Name & Mailing Address, City, Stable & Zip of Candidate (2313)	(314) 966-5000 Telephone Number (Candidate Committees O	nly)
	8/2/2022 Contre Executive Stiens,	Republican	Support
	Election Date Office Solught & Political Subdivision County	Political Party	Support dr Oppose
7.	Ballot Measure Supported or Opposed (campaign committees must complete this section)		
	Name of Ballot Measure	Election Date & Political Subdivision	Support or Oppose
	ignature(s) Check certification(s) & sign (required by all committees)		
	☑ I affirm and attest under penalty of perjury that information and facts in this report are complete, true, and accurate. I		
further acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSI			shable under Ch. 575 RSMo.
	Lillen Warnger	Tellen Waser	491
	Contemptee Treasurer	Candidate (Candidate Committees Only)	V